

Highland Community Planning Partnership

Community Planning Board – 5 December 2014

HIGHLAND COUNCIL AREA
SINGLE OUTCOME AGREEMENT

ECONOMIC GROWTH AND REGENERATION
STRAND

FY 2014/15
Q2 REPORT

Qualitative assessment

The anecdote by HIE and Business Gateway is that business confidence continues to improve, and there is significant demand on services to support growth.

There is a recognition that the Global economy remains challenging, and the downturn in Oil prices is indicative of weak global demand and future growth prospects in general.

CPP Partnership Work

The work of Glasgow University's Economics Unit (as reported to the CP Board in October) has provided a framework for planning and reporting, and is believed to be unique in Scotland.

This is underpinning discussions and planning on strategies and actions amongst the key CP Partners for this strand, notably HIE, THC, UHI (and college partners), and SDS, and engagement with the wider economy via the Economic Forum.

Following the launch of the Regional Skills Investment plan by SDS following the November CoHI meeting, a round-table meeting of HIE, THC, UHI (and college partners), and SDS is planned for early Q4 to begin to set out a detailed road map for key sectors of the economy at a sub-Highland level.

Work is underway to refresh the Highland Economic Forum, in terms of a forward look at a rolling programme of agenda items to engage and stimulate discussion, planning and action.

Quantitative Reports:

HIE Reported impacts on increases in Turnover, International Sales and Jobs resulting from activities in Q1, Q2, and in aggregate in the YTD:-

Quarter 1	Progress to Date	No. of Interventions
Increase in Turnover	70,683,267	18
Increase in International Sales	40,586,734	5
Jobs Supported (Created/Retained) FTE	303.5	18

Quarter 2	Progress to Date	No. of Interventions
Increase in Turnover	15,260,555	18
Increase in International Sales	8,098,267	8
Jobs Supported (Created/Retained) FTE	95.75	14

Q 1 and Q 2 Combined	Progress to Date	No. of Interventions
Increase in Turnover	85,943,822	36
Increase in International Sales	48,685,001	13
Jobs Supported (Created/Retained) FTE	399.25	32

Business Gateway report the following:-

- 135 volume start-ups (Target for the year 272)
- 245 advisory interventions (Target for the year 650)

On the above basis, then the high level Q2 report is:-

Indicator	Progress in Q2	Total YTD	Full Target (in aggregate)
HL1: Number of jobs created or sustained through public sector interventions (FTE)	95.75	399.25	1,153.25
HL2: Number of Business Gateway volume start up clients who have begun trading	135	t.b.c.	258.75
HL3: Number of existing businesses accessing advisory services through Business Gateway	245	t.b.c.	613
HL4: Number of VAT/PAYE registered enterprises per 10,000 populations	N/A	t.b.c.	Top 4 local authority
HL5: % of working age population (16-64) in employment	74.2	t.b.c.	Top 3 local authority

Given the data reporting challenges set out in the October Board Paper, then the above table is not an aggregation, which will be set out in the final picture for the year, which will aggregate (without double counting) employment supported via Business Gateway and HIE's interventions.

The Highland Community Planning Partnership

Community Planning Board - 5 December 2014

Agenda Item	4ii
Report No	

Employability Progress Report/Delivery Plan 2014/15

Report by Director of Development and Infrastructure

Summary: The Report presents a brief overview of key indicators and progress in response to emerging priorities which are shaping delivery during 2015.

1. Background

1.1 The Single Outcome Agreement (SOA) identifies key Employment Outcomes as widening participation in the labour market across all client groups and across all parts of Highland. In that context young people and geographic areas of high unemployment were identified as priorities. The Employment strand of the SOA is also strongly linked with Skills and Economic Development as well as addressing health inequalities. The cross cutting nature of the subject is reflected in current Scottish Government guidance on Employability – Working for Growth – which identifies strengthening strategic leadership and integrated service development as key success factors in achieving wider and more equitable employment.

2. Overview

2.1 Unemployment – The headline figures for JSA Claimants have improved since the publication of the SOA – 1,668 at October 2014 against 4,509 in February 2013. While there have been underlying changes to the JSA count that means they are not directly comparable (albeit it is known that there are an additional 410 people out of work people claiming Universal Credit) – nevertheless there appears to be overall improvement.

2.2 Youth Unemployment – It is clear that the situation regarding young people has improved considerably – 280 JSA aged 18-24 at October 2014 compared with 1,024 in February 2013. In addition, while the number of young people leaving school and progressing to positive destinations has further improved to 92.8%, a cohort of approximately 175/200 remains not in work, education or training.

2.3 Employment and Support Allowance / Incapacity Benefit – There are 8,880 people across Highland claiming. While it is known that the number of people claiming Employment Support Allowance is increasing while the number claiming Incapacity Benefit and Severe Disablement Allowance is decreasing, it is not known how many people are being considered work capable and transferring to JSA or Universal Credit.

2.4 These statistics together with anecdotal evidence from front line staff confirm

that increasingly the client group seeking support are those individuals who are furthest removed from the labour market.

3. Progress

3.1 In the progress report given to the Highland Community Planning Partnership Board on 13th October 2014, a number of joint partner and business initiatives were identified including for example, the SSE / Inverness College collaboration in recruitment and training of staff for power line installations and the improving co-commissioning arrangements between Skills Development Scotland, Highland Council and JCP. The report also identified key opportunities which will enable/drive forward partnership activity:

- Delivering on the Commission on Scotland's Young Workforce (Wood Commission);
- Highlands and Islands Skills Investment Plan and in particular, the Highland Action Plan;
- Maximising and aligning activity generated by the new EU Structural Fund Programme 2014-2020;
- Continuing to widen participation through measures that engage disadvantaged groups – returners to the labour market, people with long term conditions; people on low incomes;
- Improving alignment of partnership provision and joint working

3.2 ESF Programme 2014-2020

The Highlands and Islands have Transitional status within the EU Structural Funds. This means that Highland benefits from ring-fenced funding as part of the wider Scottish 2014-2020 Programme. The Scottish Operational Plans require that organisations accessing these funds to demonstrate that they are responding to the specific regional needs and opportunities and that they are being delivered in an integrated manner with other EU (and domestic) funded activity.

3.2.1 At its meeting on 18 November 2014, Highland Works partners agreed to prepare a shared strategic priorities statement for the ESF Programme setting out how employability services, delivered by partners across the strategic skills pipeline, will be aligned and coordinated in support of business growth in the area. This will take place on 9th December 2014 ahead of the target date set for applications for ESF resources on 12th December 2014.

3.2.2 A key issue and concern is the ability of the third sector to access ESF resources and to continue to provide employability services in Highland. Work continues nationally to establish the parameters around which this may take place and an information session with Third Sector providers in Highland is taking place on 5th December 2014.

3.3 H&I's Skills Investment Plan/Wood Commission

The H&I's Skills Investment Plan together with the Wood Commission set out a number of issues and challenges to industry and CPP partners which cross the Economic and Employment SOA themes. In response to this and a need to identify a co-ordinated way forward, the Council together with HIE and SDS

are meeting UHI and each of the Colleges on 13th January 2015, to develop a prioritised action plan. This action plan will then be brought back to Highland Works, for agreement and delivery. This will form the content of a revised and updated SOA Action Plan for 2015.

3.4 Youth Employment Equality Impact Assessment (EQIA)

In response to the SOA commitment of ensuring equality of access for all to benefit from employability services, the Council in October 2014 completed a Youth Employment EQIA of a number of its services. Whilst originally conceived as a Highland Works project across all partner youth services, the information and evidence challenges faced curtailed the scope of this work. The resultant action plan (which has been aligned with the Wood Commission recommendations) was shared with Highland Works partners on 18 November 2014 and the Council/NHS Highland Transitions partnership meeting on 13 November 2014.

Recommendation

Note progress and activity underway in response to the ESF Programme 2014-2020, the Wood Commission and the Skills Investment Plan, which together will inform a revised SOA Action Plan 2015.

Designation: Director of Development and Infrastructure

Date: 27 November 2014

Author: Andy McCann

**Highland Community Planning Partnership
Community Planning Board – 5 December 2014**

Improving Early Years Outcomes – November 2014

1. Early Years Collaborative - Making Improvement Happen

Evidence shows that the earliest years of a child's life represent the single greatest chance to make a lasting impact on their future. By making improvement happen, we will transform the futures of those who are starting their lives now. Under the banner 'Early Years Collaborative' (EYC), a method and culture is being promoted which is delivering improvement. Frontline staff and managers across a range of services are using an approach called the 'Model for Improvement'¹ to accelerate change. They are looking at what the evidence says works and testing changes which will ensure that evidence based practices are being delivered consistently and reliably.

The infrastructure is in place to support change. Within Family Teams, improvement is now being led by Practice Leads who have an explicit role. The EYC is being embedded into Council & NHS Highland Improvement Group structures. As well as progressing improvements which will help achieve the ambitious EYC 'stretch aims'², they are considering ways of using the Model to deliver a range of priorities. EYC Strategy Group members have a key role in leading and driving forward improvement. The EYC Executive is providing the leadership support.

Developing staff quality improvement skills and capacity has involved:

- Around 140 practitioners from Highland Council; NHS Highland and third sector taking part in local events. This has kick-started local improvement activities.
- Ongoing access to coaching and advice from skilled improvement advisors.
- Sharing improvement experiences and learning through team meetings, 'learning sets' and on-going communication (e.g. newsletters).
- Providing easily accessible improvement resources (on intranet and internet).
- Key staff are involved in national training to enable them to support the EYC model for improvement on an ongoing basis.

Partner services and organisations are starting to consider how they can contribute, often indirectly, to improving people's lives from their earliest years. For example Criminal Justice Services are testing and developing processes to ensure that their clients get support to develop their parenting skills.

The spread of EYC activity continues to grow. At least 41 improvement projects are underway. Other small projects and testing work is happening at team level, but haven't been formally reported on yet.

¹ See 'Early Years Collaborative' on www.highland.gov.uk Or link: [Highland Early Years Collaborative Webpage](#)

² •To ensure that women experience the positive pregnancies which result in the birth of more healthy babies as evidenced by a reduction of 15% in the rates of still births and infant mortality by 2015;
•To ensure that 85% of all children within each Community Planning Partnership have reached all of the expected developmental milestones at the time of the child's 27-30 month child health review, by end 2016;
•To ensure that 90% of all children within each Community Planning Partnership have reached all of the expected developmental milestones at the time the child starts primary school, by end 2017;
•To ensure that 90% of all children within each Community Planning Partnership have reached all of the expected developmental milestones and learning outcomes by the end of Primary 4, by end 2021.

2. Link between Number of Improvement Projects and Key Change Themes

National Key Change theme ³	No. of projects
Early support for pregnancy and beyond	6
Attachment and child development	5
Continuity of care in transitions	5
27-30 month child health review	5
Developing parenting skills	5
Family engagement to support early learning	10
Addressing child poverty	5

Examples of EYC improvement activities include:

- Establishing universal use of screening tools and processes which ensure that “85% of families get the right help at the right time through universal services & early intervention.” Several activities will contribute to this aim.
- Testing an opt-out referral to income maximisation advice. This aims to reduce poverty by increasing the number of pregnant women who uptake an offer from midwives of advice at booking, to 80% by December 2014.
- ‘From the Beginning’ - this aims, by providing clear and simple messages, for parents to interact positively with baby (and bump), to build positive relationships.
- Ensuring that babies are weaned in the best way at the best time by providing consistent advice to parents.

3. Early Years Outcomes – New Performance Measures Update

Outcome: Children & Young People Experience Healthy Growth & Development

Performance Measure	Current Situation
The percentage of children who reach their developmental milestones at their 27-30 month health review will increase year on year	Assessment model agreed. At the moment there is no comparable or published data
The percentage of children who reach their developmental milestones at entry to Primary four will increase year on year	Assessment model agreed and developmental overviews have been trialled in year one. No published data yet.
There will be a reduction in the percentage gap between the most and least affluent parts of Highland for low birth weight babies	NHS Highland will produce annual report to identify gap
Improve the uptake of 27-30 month surveillance contact from the baseline of 52% to 95% by March 2016	Improvement work underway to increase surveillance contact. Data is available, but not yet for publication. Early indications demonstrate that performance is improving.

³ A ‘Key Change’ is where there is strong evidence to suggest that implementing something, and making this reliable, will have a significant impact on achieving one of the EYC stretch aims.

95% uptake of 6-8 week Child Health Surveillance contact showing no difference in the uptake between the general population and the least affluent parts of Highland.	NHS Highland will produce annual report to identify gap
95% uptake of 6-8 week Child Health Surveillance contact showing no difference in the uptake between the general population and LAC	As above
There will be a reduction in the percentage gap between the most and least affluent parts of Highland in the number of children exclusively breastfed at the 6-8 week review	As above

Outcome: Children and young people make well-informed choices about health and safe lifestyles

Performance Measure	Current Situation
The number of early years providers who offer children healthy snack choices will increase	All Early Learning and Childcare settings currently offer healthy snacks in accordance with national and local guidance.
The number of pre-school aged children who have access to energetic physical play increases	All Early Learning and Childcare settings are currently required to provide 20 minutes energetic physical play on a daily basis either indoors or outdoors.

Outcome: Families receive support, advice and guidance which is well-matched to their needs and available in ways which helps them to prepare for the various developmental stages

Performance Measure	Current Situation
The number of pregnant women screened for substance misuse who are offered support increases.	NHS Highland developing methodology. Performance measure to be reviewed by Child Health Commissioner
The number of pregnant women who are at risk of poor mental health who are offered support increases	As above
The number of eligible children supported to take up their early learning & childcare entitlement increases	No data available. Baseline to be established once SEEMIS / NAMS is fully functional.
The number of staff trained in the use of approved parenting programmes increases	Approved parenting programmes include (Baby massage, Solihull Approach, Incredible Years, Triple P and PEEP) Records currently exist and a baseline will be established by end of December 2014 and progress reported on every 6 months (June & December)

The number of areas producing an annual plan for delivering universal and targeted support to parents increases	All 4 areas will have a plan in place by March 2015
The number of parents attending validated parenting programmes increases	Practitioners who are trained will be asked to complete a return identifying the numbers who have engaged with the programmes. Testing during December to start collating data from January 2015. Progress to reported every 6 months(June & December)
Increase the number of parents participating in a validated parenting course who have 3-4 year olds with severely disruptive behaviour	As above
The number of schools offering sessions and/or written information to parents about child development at transition to P1 increases	Methodology still to be agreed.

Outcome: Families are valued as important contributors and work as equal partners to ensure positive outcomes for their children and young people.

Performance Measure	Current Situation
The number of parents accessing the handling teenage behaviour programme increases.	Figures available for Inverness area and work ongoing elsewhere to gather data to establish baseline by end of December 2014. Progress to be reported every 6 months (June & December)
Family Nurse Partnership fidelity goals will be achieved	The detail of the Family Nurse Partnership fidelity goals are reported on monthly to the Scottish Government and monitored through the Highland Project Board. The testing phase is now completed, with all goals having been achieved. Plans are being developed to mainstream the FNP based on a shared funding arrangement with the Scottish Government.

Highland Community Planning Partnership

Community Planning Board – 5 December 2014

Update – Safer Highland Group

The Safer Highland Group has met once since the last Community Planning Board. Significant progress has been made with actions that support the Single Outcome Agreement. Full comprehensive updates have been shared to allow transparency of the individual group's ongoing activity.

The Safer Highland Group was tasked by the Chief Officers Group to raise the profile of the group in furtherance of the SOA theme 'working together for strong and safe communities'. A media event was conducted at Police Divisional Headquarters, Inverness, where photographs of the group were taken and interviews of officers took place. Whilst realising there is no control over what appears in the media, the Press and Journal and Inverness Courier displayed an appetite to raise the profile of the group.

Part of the media strategy is to ensure communities in the Highlands realise that the reduction in crime in this area is because of the partnership working in line with the Safer Highland Group, not just through policing.

Crime Position: 1st April 2014 to 31st October 2014

Overall reported crime continues to fall, with 20.2% reduction so far this year compared to last. In people terms, that is 3107 victims this year compared to 3895 last, a reduction of 788 victims.

Class 1 – Violence: 93 crimes this year, 131 last: a reduction of 29%.

Class 2 – Sexual Crimes: 182 crimes this year, 252 last: a reduction of 28%.

Class 3 – Crimes of Dishonesty, 1846 crimes this year, 2289 last: a reduction of 19%.

Class 4 – Vandalism and Fireraising: 986 crimes this year, 1223 last: a reduction of 19%.

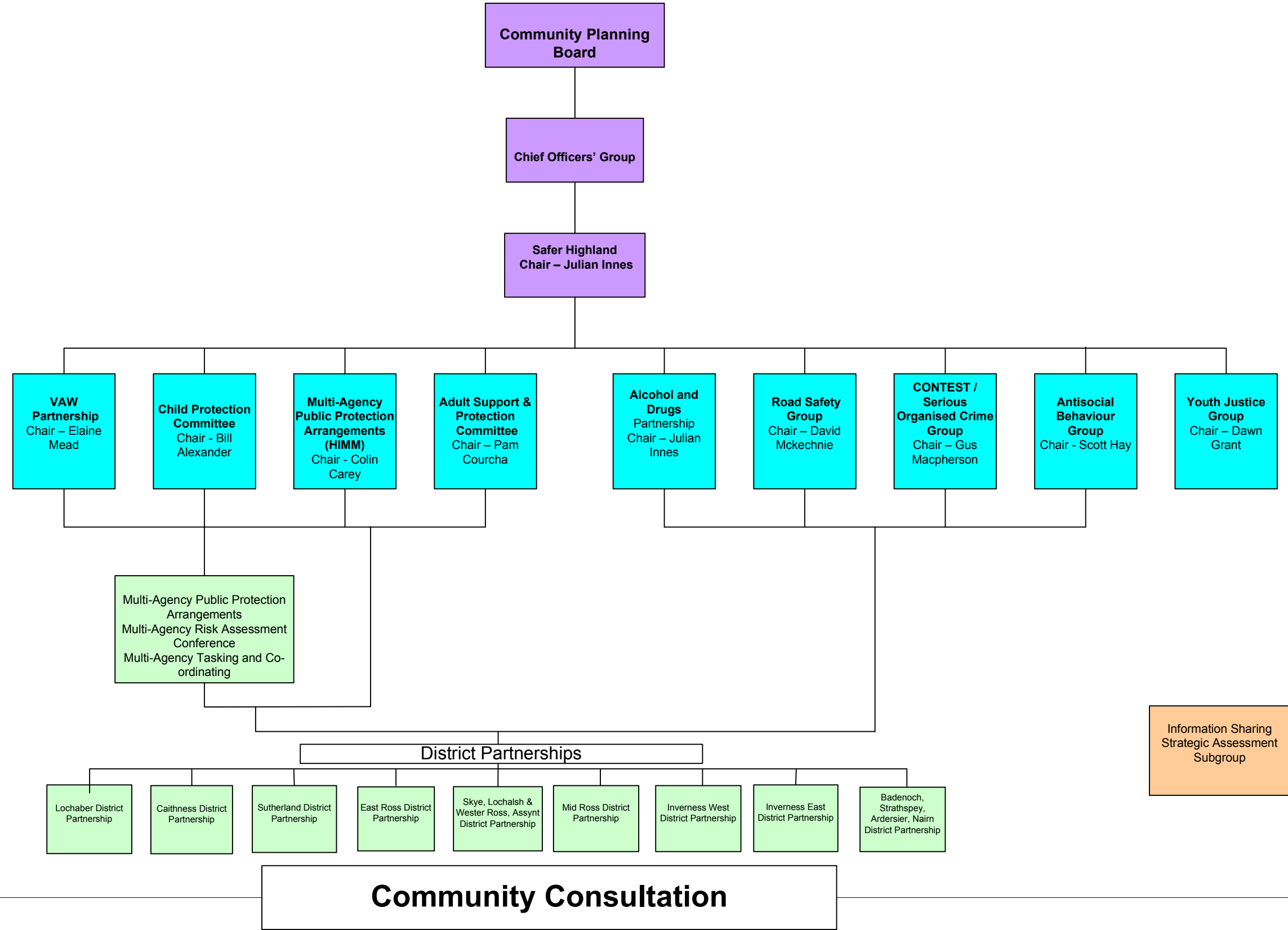
This information was scrutinised at the Community Safety, Public Engagement and Equalities Committee on Thursday 3rd December 2014.

An updated schematic of the Safer Highland Structure is attached to this report. Of note: Andrew Hodge is the new Governor of Porterfield Prison and has joined the Safer Highland Group.

CS Julian Innes
1 December 2014

SOA, Partnership Strategic Assessment, Fire/Policing Plans, Ward Plans

Scrutiny, Performance



**The Highland Community Planning Partnership
Community Planning Board – 5 December 2014**

Highland CPP Health Inequalities Theme Group Update

The Highland CPP are asked to note progress in the work of the health inequalities theme group.

- 1. Since the last update in June 2014, the group has:**
 - a. Reviewed and updated the health inequalities and physical activity delivery plan for the SOA to reflect earlier discussions with the COG and CPP Board
 - b. Produced an annual report that was presented to the October CPP Board
 - c. Progressed action on specific priorities as outlined below

- 2. Emerging Themes for further action**
 - a. Rural poverty and fragile areas will be discussed at the December meeting of the group
 - b. Self-assessment will be discussed at the December meeting of the group and will link to discussions on self-assessment that are taking place within the wider partnership

- 3. Update on THC preventative spend**

The four community health co-ordinator (CHC) posts funded by the Highland Council's preventative spend funding to support people in deprived communities continue to develop work with specific geographical areas of deprivation (Wick, Alness, Merkinch and Fort William). The three Community Food and Health Practitioners (CF&HP) are also working with our most deprived communities to develop and support initiatives that promote healthy weight.

A brief summary of the work of the CHC's and the CF&HP's is outlined below. The CHC's will present their work to the December meeting of the health inequalities theme group.

CHC's:

Community Engagement

All CHC's have made contact with a wide range of community groups, organisations and services and attended a variety of meetings, including community councils, resident associations, youth groups, community projects and statutory service meetings such as local health teams, district partnerships and ward meetings.

This process of getting to know the community and the community getting to know the CHC's is an essential first step in building key partnerships and networks for taking forward work to reduce health inequalities.

Stakeholder Analysis

In getting to know their communities, the CHC's have been undertaking a stakeholder analysis to identify the local drivers and forums that are important and active in communities. This has included the landscape in relation to local politics, relationships between groups and organisations, individuals that are involved in influencing community views and analysing where the connectedness and tensions are within their communities. This will be essential to understanding how communities work and to making sure that activity makes best use of the opportunities and connections within communities.

Local Mapping

CHC's have started to map their local communities and continue to build on community profiles that outline demographics including distribution of age and gender as well as profiling some health issues, housing and economic activity. The mapping activity also identifies local facilities, support and assets. Once completed, a full report for each area will be provided to the health inequalities group.

Significant Activities

As well as getting to know the communities and undertaking the mapping work outlined above, the CHC's have been involved in specific activities within their communities. These activities have varied according to the issues and priorities of each community but have included:

- Attend local gala day and consult the community in relation to priorities for action
- Support formation of a steering group for a community project

- Development of signposting information for local GP practice
- Development of a community 'seeding' grant scheme for local projects
- Development and delivery of training to communities on Health Issues in the Community and Participatory Action Research
- Delivery of local workshops and events on a number of issues including alcohol and young people, mental health and employability, sexual health and transitions for children from P7 to S1
- Initiation of work to develop a 'men's shed'
- Support for funding applications for community projects
- Facilitated meetings/workshops to bring people and organisations/groups that have not worked together previously to plan joint activity

CF&HP's

Community Engagement

The CF&HP have been meeting with a number and range of groups and organisations that operate or provide services in the areas covered. They have started to pull together information to map and build a profile of the communities that is relevant to their work. Part of this process of getting to know their communities has been to find out what kind of action or support people identify that they need in order to support healthy eating and physical activity.

Access and availability of healthy food

Part of the CF&HP's role is to support the roll out of the Healthy Start scheme. They have been reviewing implementation of the scheme in their areas, including finding out which shops in their areas accept healthy start vouchers, how they advertise the scheme and review what families actually use their vouchers for. They have also worked with the staff, particularly community midwives to find out what additional support might be required in their area to promote and increase the uptake of the healthy start scheme.

Developing a standard food basket list for each area is also being progressed. This work will be used to pull together prices for different retailers as a comparison and used to support discussions around access and availability of food in local communities.

Increase numbers of people who are eating a healthy diet and are physically active.

NHS Highland has taken an approach to weight management that uses the 'health at every size' approach which focuses on health behaviour change and supports outcomes that are not solely related to weight loss. CF&HP's

have been trained to deliver a programme of support to people who are interested. This programme is called 'Well now' and the CF&HP have been involved in identifying people who might be interested in attending a Well Now course and some have already started to deliver this in their area.

Discussions with communities has raised interest in offering cooking support for people and several options are being explored for this, including bringing the 'Cooking Bus' to Highland to deliver some training sessions in communities

Other activities

Other activities have included delivery of healthy eating and fruit tasting sessions. Support to community groups on healthy eating on a budget, weaning and 'cooking for one'.

4. Update on Housing and homelessness

Discussions at the health inequalities theme group identified an overlap between the various groups meeting in Highland on housing, health and homelessness. Work has been undertaken to join up these agendas and a newly formed group will now meet in the New Year to take this forward. A workshop has been arranged for the 20th January 2015 to bring together staff working on or with an interest in housing and homelessness with a view to developing a single joined up plan across this area of work.

5. Update on Fuel Poverty

Fuel poverty was discussed at the August meeting of the health inequalities theme group. It was agreed that the multi agency group working on fuel poverty would report into the health inequalities group in future as the route into the CPP.

6. Update on welfare reform

The multi agency group on welfare reform reported progress on the new pilot projects in Highland to the August meeting of the health inequalities theme group. The pilot projects are aimed at demonstrating ways in which the effects of Welfare Reform can be mitigated for adults who suffer from mental ill-health and adults who misuse substances. These pilot projects are fully funded by the Scottish Government.

Three initiatives have been developed in Highland. They are:

Easter Ross (1): The development of a physical, desktop, laminated resource to give staff, particularly those working in the fields of mental health and substance misuse, a listing of all local employability resources. This will mean simpler referral routes to clients who are thought to be ready to get back into the workplace. Staff time to update the resource annually has been identified (this will involve a minimal amount of work). The project will fund the printing of 150 A3 laminated resources but it is recognised that it is not realistic to anticipate reprints continuing into the future. After the pilot project has been completed the resource will be presented as a PDF and available electronically. The installation of appropriate software to enable this to happen has been included in the project costs.

Projected cost: £991

Easter Ross (2): Arrangements have been made for money advice/income maximisation support to be made available to clients with substance misuse problems in Invergordon and Tain. The Invergordon fortnightly service in County Community Hospital, Invergordon, with CAB providing money advice, began in October. IT have enabled Internet access for CAB to allow them to access their systems. The Tain service will be operated by The Highland Council's Money Advice/Income Maximisation staff. This service is dependent on the full opening of the new Tain Health Centre and, now that GPs have moved into the new facility, will begin in the near future. If the project is successful the evidence of its success will be used to support funding applications to enable the service to continue.

Projected cost: £2000

Wester Ross, Skye and Lochalsh: Mental health staff will be provided with tablet computers to enable them to support clients to link with Am Fasgadh, a mental health charity based in Skye which can provide a range of support and information. At present clients find it difficult to access Am Fasgadh's services; remoteness and lack of resource precludes physical presence at the service and many mental health clients find telephone access too impersonal. This service simply tests out a new way of working. At the end of the project the project equipment will be available for staff to continue to use.

Projected cost: £4865

7. Update on physical activity

Following approval of the recommendation to develop a new Physical Activity Strategy for Highland at the October meeting of the CPP Board, a multi agency group will meet early in 2015 to progress development of this strategy.

Cathy Steer

December 2014

**The Highland Community Planning Partnership
Community Planning Board – 5 December 2014**

Community Planning Arrangements – Older People

Update Report December 2014

Strategic Commissioning: The Adult Services Commissioning Group is moving forward the commissioning approach with partners and has held a commissioning intentions workshop. The Older Peoples Improvement Group prior to the meeting dedicated some time to considering the previously agreed priorities and how they might be achieved. This was a testing exercise to consider what was no longer a priority and could be stopped or reduced to release resource to develop the priorities. Members of the group from across all sectors and including users and carers were committed to finding solutions despite the challenge and this meant that proposals to the ASCG reflected the consensus of the group and were well received. The Improvement group has also now reviewed all performance indicators to allow focus on evidencing improvements in relation to these priorities as listed below-

1. Devolved Care at Home provision
2. Development of community resources and integration
3. Redesigned Telecare in the context of wider assistive technology and Living it Up
4. Establishment of single point of access to care and Integrated team approach
5. Improvements in quality of care across all sectors, reflecting continuous improvement in quality and standards.

Telecare redesign: A Telecare Steering group has been developed to take forward consideration of new models of delivery which will include promotion of assistive technology in the widest sense. The group, which includes representatives from Housing, Handy Person Schemes, Health and Safety and the Scottish Fire and Rescue Service as well as the service itself, has considered what has worked well and where improvements could be targeted. The SF&RS are particularly keen to develop a joint approach with safety and prevention driving the changes. It is hoped that a new delivery model supported by robust performance and asset management systems can be agreed by the start of the new financial year.

Single point of contact: Following the success of the testing of single points of contact in relation to co-ordinated care, the approach is being rolled out across integrated teams. It is recognised that this will look different in different Districts but the principles of one point of contact and improved communication and coordination hold fast. This work links directly with the development of the integrated teams and the testing of new processes such as the Personal Outcome Plan and new staff roles such as the Health and Social Care coordinator.

Change and Improvement Plan: A further iteration of the Change and Improvement Plan has been presented to the Education, Children and Adult Services Committee. However the development of this plan now has to fit with the expectations of the Public Bodies (Joint Working) (Scotland) Act 2014. This legislation requires the Lead

agencies to develop a Strategic Plan which goes further than the existing Change and Improvement Plan to include proposals in Acute Care and Children's services. It is proposed that the Highland Strategic Plan will be made up of the Change and Improvement Plan, For Highland's Children 4, Local Delivery plans and the Local Unscheduled Care Action Plan (LUCAP). These will fit together under the Strategic Commissioning Plan which sets out the principles of commissioning and the approach that will deliver the expected change.

Older Peoples inspection: NHS Highland has been informed that an integrated inspection of older people's services will be conducted in the new year by Healthcare Improvement Scotland and the Care Inspectorate. This inspection will be spread over three months and will cover all aspects of the care of older people. Extensive work had already been completed in terms of collating evidence ahead of the inspection and this has been submitted along with the position statement. This is of course the first truly integrated service in the lead Agency model that will have been inspected

Quality in care homes: Work continues in care homes across the sector to support improvements in quality. A Care Standards Steering Group has been established which includes representatives from all sectors including the Care Inspectorate and work continues to develop Quality schedules that will be incorporated into future contracts. NHS Highland is committed to supporting providers across the sectors in this important agenda.

Jan Baird, Director of Adult Care, NHS Highland.

December 2014

Highland Community Planning Partnership

Community Planning Board – 5 December 2014

Update in relation to delivery of Single Outcome Agreement Environment Theme Actions

Highlights

1. Highland Council held its second Carbon Clever Conference in Inverness on Monday 17 November. The conference was extremely well attended with good representation from public, private and third sectors. Presentations were received from a range of speakers from across the three sectors and there was also good opportunity for discussion in panel sessions, workshops and during breaks. The conference highlighted what has been achieved since the launch of the initiative, action currently underway and a look forward to what we might want to do next.
2. Following the decision of the Highland Environment Forum to progress preparation work on developing a Highland Land Use Strategy, key staff in SNH and THC have met to plan next steps. A recent workshop held by the Scottish Government within Inverness on the review of the Scottish Land Use Strategy reinforced, amongst local stakeholders attending, the desire to develop something more meaningful at a local, Highland, level.
3. Following an incident involving the destruction of a significant number of freshwater pearl mussels in a river in North West Sutherland the issue of wildlife crime has again been raised. SNH is working with local stakeholders and raised the profile of the specific and generic issue in the press. Highland is of particular importance for this globally rare and endangered species.
4. Following the earlier publication of a Wildcat Action Plan, SNH has followed up on this in recent weeks by identifying 6 relatively small geographical areas of particular importance for Scottish Wildcat. 3 of these areas are in Highland – Morvern, Strathfeffer and Dulnain. These are not designations but areas which are known to be important for Wildcats and to which funds might be targeted to benefit wildcats. In particular there will be 2 or 3 local posts created and actions will engage stakeholders and include measures such as targeting funds for habitat improvements and neutering schemes for feral cats.
5. The Highland Biodiversity Partnership, as a sub-group of the Highland Environment Forum, has launched a public consultation on the review of the Highland Biodiversity Action Plan. The consultation will conclude on 24 December. For further information please see <http://www.highlandbiodiversity.com/>

6. Highland Council are continuing to work on a proposed European structural funds project, "Space by the Water", which looks at the development and use of greenspace in and around the South Kessock and Merkinch areas of Inverness. This is intended to improve the health and inequality outcomes for those living in the most deprived area of Highland. The project is likely to cost around £2M and stands a very good chance of securing the required funding.
7. The Dunain Community Woodland and Scottish Waterways Trust are holding a Nature and Wellbeing seminar in Inverness on 2 December. This is a partnership project between these two bodies, but working with health professionals, the Community Woodlands Association and others. This is looking at how access provision within the community woodland at Dunain can be improved, can be better linked to access opportunities around the canal and how this infrastructure can be used to promote good physical and mental health. This is a pilot project and is understood to have been very successful.

Issues

8. Increasingly the linkages between specific projects/services and the wider aspirations in terms of social justice are being made. This is very much in line with and due, in part, to community planning and the Single Outcome Agreement. We need to continue to think about how we better promote and encourage these linkages.

Conclusion

9. There is significant work underway within Highland relevant to the Environmental theme. Some of this work can now be specifically attributed to community planning and the Single Outcome Agreement. The rest of it, whilst it might have happened anyway, is being influenced by the community planning agenda. We need to build on this to make community planning real and meaningful for communities across Highland.

For further information or to discuss any issues raised in this update please contact:

George Hogg
Scottish Natural Heritage.

Highland CPP Development Plan 2014 to 2018: Update for CPP Board December 2014

Area for improvement	Source	Improvement Activity	Timescale
Partnership Performance Management and reporting	Quality Assurance Panel 2013 CPP Board self-assessment 2014 Audit Scotland	<ol style="list-style-type: none"> 1. Refreshed delivery plans for each theme within the SOA 2. Continue quarterly performance reports to Board 3. Avoid duplication in reporting performance – proposals agreed with Responsible Officers concerned 4. Await outcome of CPP performance indicators project (SG/IS) 5. Improve performance reporting to the public on progress made in the CPP 6. Self- assessment followed up in theme groups for economic growth, health inequalities & physical activity and the environment. 	<ol style="list-style-type: none"> 1. Oct 2014 2. Quarterly 3. Dec 2014 4. TBC 5. Sept 2015 6. Dec 2015
<p>Update:</p> <ol style="list-style-type: none"> 1. Four delivery plans completed and agreed at Board in October, three delivery plans are being finalised and will be completed in December/January. Work across all 7 delivery plans is progressing as reported in quarterly up-dates. 2. The Council's Corporate Performance Manager is liaising with the responsible officers for children/early years and older people to avoid duplication in future performance reporting. 3. HIE to set out proposals for future performance reporting to Board meeting in March 2015. 4. Issues associated with Orkney Islands CPP audit on improving performance measurement and reporting shared with Chief Officers. 			
Maximise the use of collective resources to achieve best outcomes, demonstrating a shift to prevention and the re-allocation of resources between CPP members	CPP review of process priorities CPP Board self-assessment 2014 National Community	<ol style="list-style-type: none"> 1. Chief Officers Group identifies group of officers to make proposals 2. Budget proposals shared and cumulative impacts identified, partners views influential 3. First report from Group to Board 	<ol style="list-style-type: none"> 1. June 2014 2. Feb 2015 3. March 2015

where this represents best value.	Planning Group Audit Scotland		
Up-date <ol style="list-style-type: none"> 1. Partners' budget context and savings proposals shared at COG meeting November 2014. 2. Partner views sought and fed into Council's budget consultation process. 3. Third sector interface gathered views from third sector groups to feed into the Council's budget savings proposals 4. NHSH and Police Scotland participated in Council equalities impact assessment and rural impact assessment of budget savings proposals. 5. Date targets above will be met. 			
Engage in dialogue with communities in order to empower them to participate in service planning and delivery	CPP review of process priorities Quality Assurance Panel 2013 Community Empowerment legislation	<ol style="list-style-type: none"> 1. Continue review of how District Partnerships might be forums for local community planning and improves alignment between SOA priorities and local needs and intervention. Prepare proposals for the Board 2. Begin quarterly up-dates from the Community Learning and Development Strategic Partnership 3. Explore the scope for participatory budgeting 4. Report implications from Community Empowerment Legislation to Board 	<ol style="list-style-type: none"> 1. March 2015 2. Dec 2014 3. March 2015 4. March 2015
Up-date <ol style="list-style-type: none"> 1. Discussion planned for next Chief Officers Group on evolution of District Partnerships and Board proposals on track for March 2015. 2. CLD up-date provided for this Board meeting 3. Government training on participatory budgeting attended by Council staff, two elected members and NHSH in November 2014. Further discussion will be planned in CPP by March 2015. 4. Community Empowerment Bill implications and Strengthening Local Democracy Commission publication discussed at COG meeting November 2014 and areas of joint working identified. 5. Community Empowerment Bill implications reported to Board ahead of target – Dec 2014 to enable joint working for implementation. 			

Collaborate on workforce planning and skills development to meet Highland needs, in the context of the Highlands and Islands Skills Investment Plan and our roles as major employers	CPP review of process priorities Audit Scotland	<ol style="list-style-type: none"> 1. Chief Officers Group identifies group of officers to make proposals 2. SDS presentation to Board 3. First report from Group to Board 4. Review extent to which the CPP promotes collaboration – does the CPP encourage, support, and reward collaborative behaviour amongst staff? <i>Task to be allocated.</i> 	<ol style="list-style-type: none"> 1. June 2014 2. Dec 2014 3. March 2015 4. June 2015
Update <ol style="list-style-type: none"> 1. SDS invited to attend CPP Board December 2014 (attendance tbc at time of writing) 2. First report from group on target for March Board meeting. 			
Tackle deprivation and inequalities including by improving access and connectedness for communities	CPP review of process priorities	<ol style="list-style-type: none"> 1. Being taken forward through the health inequalities group. 2. Quarterly progress/performance reports to the Board 	<ol style="list-style-type: none"> 1. From Oct 2014 2. From Dec 2014
Update <ol style="list-style-type: none"> 1. Initial HIE briefing on fragile areas provided to members of Planning Committee and partners invited, November 2014. Wider CPP views to be gathered. 			
Value and be positive about Highland life to attract people, jobs and investment.	CPP review of process priorities	<ol style="list-style-type: none"> 1. To be woven through CPP activity, events and promotions. 2. Communications officers from across the CPP liaise on publicity 	Ongoing activity

**Highland Community Planning Partnership
Community Planning Board - 5 December 2014**

Community Learning & Development Strategic Partnership – November 2014

Background

National strategic guidance for CPPs on Community Learning & Development was produced in 2012.

The National Performance framework indicates that the purpose of CLD is ‘to *empower people, individually & collectively, to make positive changes in their lives and in their communities, through learning*’, and that CLD should focus on establishing:

- Improved life chances for people of all ages, through learning, personal development and active citizenship
- Stronger, more resilient, supportive, influential and inclusive communities.

New legislative regulations, designed to strengthen the position of CLD, place a duty on Education Authorities (i.e. Local Authorities) to publish a 3 year CLD plan by 1 September 2015 and 3 yearly thereafter. Although the legislative duty falls on the Local Authority, it is clear that partners are expected to work together to develop & implement the Plan, and the Strategic Guidance recommends that this is done through the vehicle of a CLD Partnership.

A new CLD Inspection regime has also been established. The geographical basis for inspection is Associated School Groups, of which there are 29 in Highland.

In June, the CPP agreed to form a Community Learning & Development Strategic partnership, composed of senior officers from each of the agencies, and with the Director of Care & Learning as the Chair.

It was further agreed that:

- The Partnership develop a CLD Plan, by the deadline of September 2015, and reflecting the strategic guidance, using a framework of the 9 District Partnership geographies.
- The Partnership map current CD and related posts and accountabilities for CD work that nest within the 9 Districts.
- A senior officer be identified from each district to be a member of the CLD Partnership, to be responsible for leading, promoting and supporting collaboration and partnership working in CLD activity in their District, and accountable to the CPP for this through the CLD Partnership. The officer could be from any partner agency or network, and a mix of agency backgrounds across the whole CPP area should be sought.
- Agencies commit to ensuring that future CLD developments, including the creation or continuation of posts, take place within the context and agreed framework of the strategic CLD Plan.

- The respective District Lead (as above) is responsible & accountable for preparing for Education Scotland inspections of CLD, with support and guidance given by the CLD Partnership.

Community Learning & Development Strategic Partnership

The first meeting of the CPP's Community Learning & Development Strategic Partnership was formed and held its first meeting in August.

The Partnership involves:

- Bill Alexander Director of Care and Learning - THC
- Fiona Palin Head of Adult Services - THC
- Douglas Wilby Head of Performance – HLH
- Stewart Sandison Operations Manager - SNH
- John MacDonald Fire & Rescue Scotland
- Deb Jones Chief Operating Officer - NHS Highland
- Stuart Black Director of Planning & Development - THC
- Carron McDiarmid Head of Policy and Reform - THC
- Pablo Mascarenhas Principal Adult and Youth Services Officer – HLH
- Mhairi Wylie Chief Officer – Third Sector Interface
- Roy Kirk Area Manager – HIE
- Mairi MacInnes Police Scotland
- Mike Devenney UHI

Police Scotland, UHI and HIE were not able to attend the first meeting, due to other commitments and poor weather on the day.

The initial meeting scoped about the context for the formation of the Partnership by the CPP, and key current issues in relation to Community Learning and Development. This included:

- That we should be seeking a model to support community development that was effective and appropriate, and that also supported the inspection of CLD, rather than being inspection-led.
- The possibility of using the (safe, healthy, achieving, nurtured, active, respected, responsible, included) wellbeing indicators as the framework for evaluating community resilience and capacity.
- The key role of Ward Managers and Youth Development Officers
- How to decide which communities to support, as there are currently stronger, wealthier communities out there. Should the group focus on the poorer or less resilient communities first?
- How to engage and communicate with the communities - and encourage the less resilient communities to engage more.
- Other funding the communities have access to, including Big Lottery, community benefit, etc
- Work has commenced in Skye about mapping local roles and relationships.
- What would success look like? - ie what we are seeking to achieve is important so we can measure outcomes. These might be short and long term.
- We need to look at this work in conjunction with other initiatives eg land reform and community empowerment and not do it in isolation.

An agenda was set for further discussion, to enable the development of a workplan, and including:

- CLD Plan Guidance
- Feedback from Community Learning inspections
- Feedback from the recent Skye and Lochalsh scoping experience
- HIE Presentation on the four remote and rural pilots
- Framework for evaluating community resilience
- An update on participatory budgeting
- Clarification regarding THC Ward Managers input
- Mapping of local resources (see appendix)
- Mapping of structures and processes

Since August, despite regular endeavours, it has not proved possible to get a date when sufficient numbers of the group were all available to hold a subsequent meeting. A date is presently provisionally arranged for early January.

Ongoing Activity

In the meantime, discussion is commencing with District Partnerships, to prepare the ground for this developing agenda. As well as the statutory requirements for a Community Learning and Development Plan, this is taking account of:

- The requirement for NHS Highland and Highland to produce an Integration Scheme as part of the integration of adult and children's services
- Community Empowerment (Scotland) Bill
- The 'Effective Democracy: Reconnecting with Communities' Report
- The intent to have a District *For Highland's Children 4* Plan
- The intent to have a District *Change & Improvement Plan* for Adult Services
- Continuing aspirations for District Partnerships to join up local community planning issues (e.g. volunteering, transport, employability; environment; land reform; social enterprise)

This will lead to further updated draft District Partnership guidance for the Board to consider.

Appendix

Some current CPP infrastructure support for community capacity building

- Community Development Officers – NHS
- Community Health Co-ordinators – NHS
- Community Dieticians – NHS
- Community Networkers – Highland 3rd Sector Interface (HTSI)
- HIE Community Account Holders
- 4 rural community development initiatives supported by HIE
- Rural development funding supported by the EU LEADER programme via Local Area Partnerships
- Highland Council Community Challenge Fund
- HTSI support for volunteering and social enterprises
- Support for Community Councils – THC
- CLD and Integrated Learning Communities via schools and HighLife Highland
- Early Years community capacity building